

Applicant-Please check all that apply:

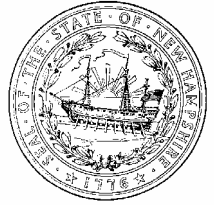
_____ Renewal

_____ New truck/container

State of New Hampshire



WATER DIVISION
WASTEWATER ENGINEERING BUREAU
29 HAZEN DRIVE, P.O. BOX 95
CONCORD, NEW HAMPSHIRE 03301
(603) 271-3908



SLUDGE HAULER APPLICATION

NOTE: Per the requirements outlined in Env-Ws 805.01, Sludge Management Rules.

APPLICANT INFORMATION:

NAME OF APPLICANT: _____

ADDRESS: _____

_____, ZIP: _____

HOME PHONE #: (_____) _____ E-MAIL ADDRESS: _____

APPLICANT'S BUSINESS:

NAME OF BUSINESS: _____

ADDRESS: _____

_____, ZIP: _____

CONTACT PERSON: _____

BUSINESS PHONE #: (_____) _____

EMERGENCY PHONE #: (_____) _____

SLUDGE TRANSPORTING COMPANY* (if different from name of business)

NAME: _____

TOWN: _____

BUSINESS PHONE #: (_____) _____

***NOTE:** The company name, principal place of business, and phone number shall appear on both sides of vehicle unless the vehicle bears a municipal seal.

VEHICLE/CONTAINER INFORMATION:

Current NHDES Permit # _____

MAKE, MODEL, & YEAR OF VEHICLE: _____

MOTOR VEHICLE IDENTIFICATION NUMBER: _____

MOTOR VEHICLE PLATE NUMBER: _____

STATE

PLATE #

CONTAINER ID #: _____ SIZE OF CONTAINER (CUBIC YARDS): _____
(if applicable) (or GALLONS)

****Use attached sheet for any additional containers****

FEE: The fee is One Hundred Dollars (**\$100.00**) per transport vehicle and initial container used to carry sludge or class B biosolids, One Hundred Dollars (**\$100.00**) for each additional transport vehicle, and fifty dollars (**\$50**) for each additional container. Checks should be made payable to: TREASURER-STATE OF NH. Address envelope ATTENTION: Sludge Hauler Permits (mailing address on front of form).

NOTE: Sludge hauler permits shall have a duration of 2 years or less and shall expire on January 31 of the odd numbered year following the date of issuance.

CERTIFICATIONS:

To the best of my knowledge, the data and information which I have submitted to obtain a permit to remove or transport sludge is true and correct. I understand that a permit based on false or inaccurate data is subject to revocation. I also understand that transporting sludge derived from human waste over public roads is prohibited without prior written approval pursuant to Env-Ws 805 from the New Hampshire Department of Environmental Services.

I hereby certify that all vehicles and containers proposed to be used to transport sludge have met all applicable Federal and State requirements for sludge transportation.

I hereby certify as an applicant that I have not been convicted of a misdemeanor charge under any statute administered by the Department of Environmental Services within the 5 years prior to the date of application, or of a felony charge under any statute administered by any State or Federal court within the 10 years prior to the date of application.

I hereby certify that upon issuance of the permit, I assume complete responsibility for ensuring that all persons who will be transporting sludge with the applicant's vehicle(s) are familiar with the requirements of Env-Ws 800.

Signature of Applicant

Date

NOTE: Env-Ws 805.03 requires that **RENEWALS** be submitted no later than thirty (30) days prior to permit expiration.

ADDITIONAL SLUDGE HAULER VEHICLES

(For use when the sludge hauling vehicle is integral with the container)

APPLICANT'S BUSINESS NAME: _____

VEHICLE/CONTAINER INFORMATION: **Current NHDES Permit #** _____

MAKE, MODEL, & YEAR OF VEHICLE: _____

MOTOR VEHICLE IDENTIFICATION NUMBER: _____

MOTOR VEHICLE PLATE NUMBER: _____

STATE

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CONTAINER ID #: _____ SIZE OF CONTAINER (CUBIC YARDS): _____
(if applicable) (or GALLONS)

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(if applicable) (or GALLONS)

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Signature of Applicant

Date

ADDITIONAL SLUDGE HAULER CONTAINERS

(For use when the container is separate from the sludge hauling vehicle, such as a roll-off or separate trailer)

APPLICANT'S BUSINESS NAME: _____

CONTAINER INFORMATION:

Current NHDES Permit # _____

MAKE, MODEL, & YEAR OF CONTAINER: _____

CONTAINER VIN #: _____

CONTAINER PLATE NUMBER: _____

(if applicable)

STATE

PLATE #

CONTAINER ID #: _____ SIZE OF CONTAINER (CUBIC YARDS): _____

(or GALLONS)

CONTAINER INFORMATION:

Current NHDES Permit # _____

MAKE, MODEL, & YEAR OF CONTAINER: _____

CONTAINER VIN #: _____

CONTAINER PLATE NUMBER: _____

(if applicable)

STATE

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CONTAINER ID #: _____ SIZE OF CONTAINER (CUBIC YARDS): _____

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